PREVAILED	Roll Call No
FAILED	Ayes
WITHDRAWN	Noes
RULED OUT OF ORDER	

## **HOUSE MOTION**

## MR. SPEAKER:

I move that Engrossed Senate Bill 96 be amended to read as follows:

1	Page 1, between the enacting clause and line 1, begin a new
2	paragraph and insert:
3	"SECTION 1. IC 12-15-44.2-4, AS ADDED BY P.L.3-2008,
4	SECTION 98, IS AMENDED TO READ AS FOLLOWS [EFFECTIVE
5	JULY 1, 2009]: Sec. 4. (a) The plan must include the following in a
6	manner and to the extent determined by the office:
7	(1) Mental health care services.
8	(2) Inpatient hospital services.
9	(3) Prescription drug coverage.
10	(4) Emergency room services.
11	(5) Physician office services.
12	(6) Diagnostic services.
13	(7) Outpatient services, including therapy services.
14	(8) Comprehensive disease management.
15	(9) Home health services, including case management.
16	(10) Urgent care center services.
17	(11) Preventative care services.
18	(12) Family planning services:
19	(A) including contraceptives and sexually transmitted disease
20	testing, as described in federal Medicaid law (42 U.S.C. 1396
21	et seq.); and
22	(B) not including abortion or abortifacients.
23	(13) Hospice services.
24	(14) Substance abuse services.

MO009602/DI 44+

1	(15) Chiropractor office services.
2	(b) The plan must do the following:
3	(1) Offer coverage for dental and vision services to an individual
4	who participates in the plan.
5	(2) Pay at least fifty percent (50%) of the premium cost of dental
6	and vision services coverage described in subdivision (1).
7	(c) An individual who receives the dental or vision coverage offered
8	under subsection (b) shall pay an amount determined by the office for
9	the coverage. The office shall limit the payment to not more than five
10	percent (5%) of the individual's annual household income. The
11	payment required under this subsection is in addition to the payment
12	required under section 11(b)(2) of this chapter for coverage under the
13	plan.
14	(d) Vision services offered by the plan must include services
15	provided by an optometrist.
16	(e) The plan must comply with any coverage requirements that
17	apply to an accident and sickness insurance policy issued in Indiana.
18	(f) The plan may not permit treatment limitations or financial
19	requirements on the coverage of mental health care services or
20	substance abuse services if similar limitations or requirements are not
21	imposed on the coverage of services for other medical or surgical
22	conditions.
23	(g) The plan may not permit treatment limitations or financial
24	requirements on the coverage of chiropractor office services if
25	similar limitations or requirements are not imposed on the
26	coverage of physician office services.".
27	Renumber all SECTIONS consecutively.
	(Reference is to ESB 96 as printed April 10, 2009.)
	Representative Reske

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